


01-11-07

IFW

Atty. Dkt. No. 047711-0331

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Leif BOWMAN, et al.  
Title: SUBCUTANEOUS INFUSION SET  
Appl. No.: 10/705,686  
Filing Date: 11/10/2003  
Examiner: Theodore J. Stigell  
Art Unit: 3763  
Confirmation Number: 4638

|  |                   |
|--|-------------------|
| <b>CERTIFICATE OF EXPRESS MAILING</b>  |                   |
| I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. |                   |
| EV 928484440 US  | 01/10/2007        |
| (Express Mail Label Number)  | (Date of Deposit) |
| Kumar Maheshwari   |                   |
| (Printed Name)   |                   |
|    |                   |
| (Signature)  |                   |

**AMENDMENT AND REPLY UNDER 37 CFR 1.111**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This communication is responsive to the Non-Final Office Action dated 10/11/2006, concerning the above-referenced patent application.

**Remarks/Arguments** begin on page 2 of this document.


Please amend the application as follows:



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| (Printed Name)   |                   |
|    |                   |
| (Signature)  |                   |

**AMENDMENT TRANSMITTAL**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- ☐ Assertion of Small Entity status is enclosed.
- ☒ The fee required for additional claims is calculated below:

| Claims  |            | Extra   |      | Additional<br>Claims Fee |
|---------|------------|---------|------|--------------------------|
| As      | Previously | Claims  | Rate |                          |
| Amended | Paid For   | Present |      |                          |

|  |    |   |    |   |   |   |          |   |          |
|--|----|---|----|---|---|---|----------|---|----------|
| Total Claims:  | 38 | - | 40 | = | 0 | x | \$50.00  | = | \$0.00   |
| Independent Claims:                                  | 6  | - | 6  | = | 0 | x | \$200.00 | = | \$0.00   |
| First presentation of any Multiple Dependent Claims: |    | + |    |   |   |   | \$360.00 | = | \$0.00   |
| CLAIMS FEE TOTAL                                     |    |   |    |   |   |   |          |   | = \$0.00 |

☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

|  |            |        |
|--|------------|--------|
| <input type="checkbox"/> Extension for response filed within the first month:  | \$120.00   | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the second month: | \$450.00   | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the third month:  | \$1,020.00 | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the fourth month: | \$1,590.00 | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the fifth month:  | \$2,160.00 | \$0.00 |
| EXTENSION FEE TOTAL:   |            | \$0.00 |
| <input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):     | \$130.00   | \$0.00 |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:                                    |            | \$0.00 |
| <input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):        |            | \$0.00 |
| Extension Fees Previously Paid:  |            | \$0.00 |
| TOTAL FEE:   |            | \$0.00 |

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date

January 10, 2007

FOLEY & LARDNER LLP

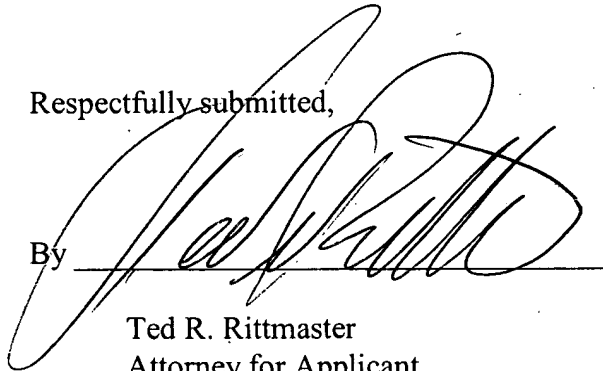
Customer Number: 23392

Telephone: (310) 975-7963

Facsimile: (310) 557-8475

Respectfully submitted,

By

A large, stylized handwritten signature in black ink, appearing to read 'Ted R. Rittmaster', is written over a horizontal line.

Ted R. Rittmaster

Attorney for Applicant

Registration No. 32,933